FROM McANDREWS, HELD, & MALLOY (F Complete and send this form, together with a, icable fee(s), to: Ma					(I) 8. 26' 05 14:43/ST. 14:42/NO. 4861050675 P 2 Mail Stop ISSUE 12:42/NO. 4861050675 P 2 Commissioner for Patents P.O. Box 1450 Alexandria, Virginia 22313-1450			
		'M' - A - 1551T	FA		71 273 2885	A Planta 1 shound 5 c	hould be completed ush	
instructions: Impropriate. All further con indicated unless corrected to maintenance fee notification	respondence including the P selow or directed otherwise:	atent, advance ordin Block 1, by (z)	ers and notif	ication o	of maintenance fees werespondence address;	red). Blocks 1 through 5 s rill be mailed to the current and/or (b) indicating a sepa	correspondence address	
CURRENT CORRESPONDENCE 75 Christopher C Wi McAndrews Held & Suite 3400 500 W Madison St	\5\\·	6 2005 Hills		Note: A certificate of mailing can only be used for domestic mailings of Fcc(s) Transmittal. This certificate cannot be used for any other accompany papers. Each additional paper, such as an assignment or formal drawing, m have its own certificate of mailing or transmission. Certificate of Mailing or Transmission I bereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmisted to the USPTO (571) 273-2825, on the date indicated below.				
08/29/2005 ABENESSE 9666	0048 130017 0912944	18 B	مُعَمَّلُهُ الْمُعَلِّلُهُ الْمُعَلِّلُهُ الْمُعَلِّلُهُ الْمُعَلِّلُهُ الْمُعَلِّلُهُ الْمُعَلِّلُهُ		Michael T.	Cruz	(Depositor's tot	
01 FC:1501 1400.00		Reg. No.	: 44,6	36	Michael 1 August 26,	2008	(D)	
APPLICATION NO.	PILING DATE	FIRST NAMED INV		NYEN	TOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.	
09/129,448	08/04/1998	RONALD L. MAF			NY	14235US01	4521	
TITLE OF INVENTION: HIERARCHICAL COMMUNICATION SYSTEM PROVIDING INTELLIGENT DATA, PROGRAM AND PROCESSING MIGRATION								
APPLN. TYPE	SMALL ENTITY	ISSUE FE	E	PU	BLICATION PEE	TOTAL FEE(S) DUE	DATE DUE	
nonprovisional	МО	\$1400			\$0	\$1400	09/29/2005	
EXAMINER		ART UNIT		CI	ASS-SUBCLASS]		
NGUYEN, TOAN D		2665			370-256000			
1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.				2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up in 2 registered patent attorneys or agents. If no name is listed, no name will be printed.				
3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type) PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment. (A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY) Broadcom Corporation Irvine, CA								
Please check the appropriat	te assignee category or catego	ories (will not be pr	inted on the p	patent):	Individual 🕮	Corporation or other private g	group entity Governm	
4a. The following fee(s) are enclosed: Ab. Payment of Fee(s): A check in the amount of the fee(s) is enclosed. Publication Fee (No small entity discount permitted) Advance Order - # of Copies Deposit Account Number 13-0017 (enclose an extra copy of this form).								
	s (from status indicated abov				- 1	ALL ENTITY status. See 37	CER 1 27(a)(7)	
The Director of the USFTC NOTE: The Issue Fee and interest as shown by the reconstruction.	SMALL ENTITY status. See D is requested to apply the Iss Publication Fee (if required) cords of the United States Fa	nie Pee and Publica will not be accepted tent and Trademark				sly paid issue fee to the appli gistered attorney or agent, or		
Authorized Signature Michael T. Cause Date August 26, 2005								
Typed or printed name			on is required	to obtain			and by the USPTO to proc	
This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to proc an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to comp this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 14 Alexandria, Virginia 22313-1450. Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.								